

MaineDOT

CONSULTANT CONTRACT STANDARD INVOICE

Cost Plus Fixed Fee - Burdened Rate - Lump Sum

WORKBOOK GUIDE

(Microsoft Excel 2002)

EACH INVOICE SUBMITTED MUST:

- 1. CONTAIN DATA FOR ONE CONTRACT ONLY, INCLUDING MULTI-PIN DETAIL AS APPROPRIATE.
- 2. CONTAIN A "CONSULTANT INVOICE NUMBER" THAT IS UNIQUE TO THAT FIRM AND CONTRACT WITH NO MORE THAN 12 CHARACTER FIELDS USED (including punctuation and spaces).
- 3. INCLUDE SHEET 4 OF 5, SUBCONSULTANT DBE/WBE DETAIL, EVEN IF TOTALS ARE ZERO.
- 4. INCLUDE THE SAME SUPPORTING INFORMATION ATTACHED TO THE INVOICE AS IN THE PAST.
- 1) Yellow and tan colored cells are for data entry. Tan cells will need review or update with each invoice submitted, many yellow cells should only require data entry with the first invoice for a contract. Data for blue colored cells is derived by formula, or by link from another cell in the workbook.
- 2) It is suggested that you begin with <u>Sheet 2 of 5</u> Contract Data, adding Company and Contract information. Be sure to determine which "Yes/No" question in the upper left corner applies to your contract (Lump Sum contracts may have 2 yes answers). This determines which Summary Sheet (1A, 1B, or 1C) is filled with data. <u>Sheet 3 of 5</u>, Direct Labor Detail and <u>Sheet 4 of 5</u>, Sub consultant Detail should be self explanatory. Finally, <u>Sheet 5 of 5</u> breaks down invoice costs by MaineDOT PIN, including direct expense detail if appropriate. Totals from this Sheet are fed back to the appropriate Sheet 1; if they don't match direct labor and sub consultant data on Sheets 3 and 4 then an "Error" message appears.
- 3) Sheet 2 of 5, top right side, "Final Invoice?", must indicate either "yes" or "no" and should not be left blank. This not only aids processing, but also provides critical data for formulas and cells on other sheets.
- 4) The Workbook does not include an entry anywhere for the amount of Contract Fixed Fee being invoiced. Sheet 2 of 5 Contract Data does require entry of the percentage of total contract fixed fee earned to date (% Complete To Date), in order to calculate the amount of fixed fee due on each invoice.
- 5) Overhead amounts are listed but not calculated by formula on **Sheet 2 of 5** Contract Data. This prevents rounding differences with local software programs. The cells are not protected, so formulas to calculate these values line by line can be inserted if desired.

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WORKBOOK GUIDE - Continued

(Microsoft Excel 2002)

- 6) Sheet 3 of 5 does not require data for Lump Sum contracts unless you are submitting a final invoice.
- 7) Sheet 4 of 5, Subconsultant Detail, must always be completed whenever subconsultants are used, even with Lump Sum contracts.
- 8) Sheet 1C of 5 (Lump Sum) will show only a summary of labor, overhead and profit or lump sum costs with each invoice up to the final invoice. Final invoice submittal requires labor, overhead and profit breakdowns for the entire contract (See Note #9 below).
- 9) An additional Sheet 1CF of 5 (Lump Sum) has been added to summarize labor, overhead and profit total effort values for the entire contract at final invoice. These values are to be reported in detail on Sheets 2-5 as appropriate when submitting a Lump Sum final invoice.
- 10) <u>All Sheets</u> are password protected, but **Sheet 3 of 5** does allow local sorting of fields such as name and PIN.
- 11) The MaineDOT PIN field is preformatted to produce an 8 digit number in decimal format. Do not enter a decimal point. The last 2 digits entered must be the 2 digits to the right of the decimal (even zeros), but no decimal should be shown. Do not enter leading zeros.
- 12) The payment address can be entered directly on Sheet 1 if it is different than the firm address entered on Sheet 2. It is very important that the Vendor/Customer # entered on Sheet 2 (if your firm has more than one) be the number associated with your desired payment address.
- 13) Comment boxes have been added to a number of data entry fields to help clarify input intentions, or identify specific needs in those cells.
- 14) Function and Activity coding for PIN lines on **Sheet 5 of 5** is not mandatory to submit a completed invoice, but should be entered if known, especially for multiPIN projects.
- 15) A column has been added on the right side of Sheet 2 to allow for adjustments to contract totals when changes are made to contract overhead amounts. If the Firm's overhead rate changes during the life of the contract, but the total contract amount does not and no other off-setting adjustments are made to the remaining contract cost components; then an off-setting value is needed in this column; in order to produce the correct contract value on Sheet #1. The new overhead rate (%) should be added to a Mod. line on Sheet #2 along with the changes (+ or -) in overhead amounts. If the total for that line in Column P is positive, then an equal negative amount is needed in Column Q and visa-versa.

February 2013

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- 16) Changes have been made to the invoice workbook, allowing calculation of a fee amount only, without the usual labor and averhead, if a contract reaches 100% complete with less than 100% of contract labor & overhead amounts being invoiced.
- 17) Changes have been made to the invoice workbook that will allow credits or adjustments to a final invoice. These changes are on Sheet #1 and provide for data entry detailing needed adjustments just above "Total Amount Due This Invoice". Invoice adjustments of this nature are not frequent and should only be used when developing a final invoice. If not a final invoice and an adjustment is needed please add line(s) to Sheets 3, 4 and/or 5 introducing the adjustment needed.

Sheet 1A of 5 Internal Use Only **State of Maine Department of Transportation Transportation Building 16 State House Station** P.V. #: Payment Type: **Augusta, Maine 04333-0016** CT #: * Cost Plus Fixed Fee CSN #: **In Account With** Vendor/Customer #: TEDOCS #: <= Firm Name Doc. Date: Street (PO Box) <= Payment mailing Doc. Type: Town, State ZIP address OUC: Author: Vendor/Customer # => Consultant Invoice Number: Invoice Date: Invoice Period: State Contract Number: Consultant Project #: MaineDOT PIN: **Project Contract Award Date:** COMMENT: **Project Contract Completion Date: Project Name:** I hereby certify that the signature below is true and accurate. I further certify, if electronic, that it (a) is intended to have the same force as a manual signature, (b) is unique to myself, (c) is capable of verification, and (d) is under the sole control of myself. Initials: Cumulative Amount **Total Amount** Contract Signed: **Amount Invoiced Contract Amounts Invoiced This Period Previously Invoiced Balance** Please Type: Name, Title To Date Straight Direct Labor = Straight Time Overhead = Overtime Direct Labor = Overtime Overhead = Sub Total Direct Labor + Overhead = Fixed Fee = Sub-Total: DL + OH + Fee = **Direct Expenses** (see Sheet 5 of 5 for detail) = Subconsultant Summary: DBE/WBE => yes/no Total Subconsultants = **Total Invoice Amounts =** Final Invoice Credits/Adjustments = Detail: 1) Approved by: 2) MaineDOT Program/Project Manager Date TOTAL AMOUNT DUE THIS INVOICE = (Work performed as specified)

Sheet 1B of 5 Payment Type: * Burdened Hourly Rate * Cost per Unit of Work		te of Maine Departmer Insportation Building 1 Augusta, Maine **In Accou	16 State House Station e 04333-0016	າ <= Firm Name	Internal Use Only P.V. #: CT #: CSN #: Vendor/Customer #: TEDOCS #: Doc. Date:		
		Street (PO Box) Town, State ZIP		<= Payment mailing address	Doc. Type: OUC:		
		Vendor/Customer # =>		-	Author:		
Consultant Invoice Number:					Invoice Date:		
Invoice Period: State Contract Number: Project Contract Award Date: Project Contract Completion Date:			COMMENT:	Consultant Project #: MaineDOT PIN: Project Name:			
I hereby certify that the signature below is true and to have the same force as a manual signature, (b) under the sole control of myself. Initials:	is unique to myself, (c) is capable						
Signed: Please Type: Name,	Title	Amount Invoiced This Period	Total Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance	
	Straight Direct Labor = Straight Time Overhead =						
	Overtime Direct Labor = Overtime Overhead =	:					
Sub Total	Direct Labor + Overhead = Profit =						
Suh	o-Total: DL + OH + Profit =						
	es (see Sheet 5 of 5 for detail) =						
Subconsultant Summary:							
	Total Subconsultants =						
	Total Invoice Amounts =						
Detail: 1) 2) 3)	ice Credits/Adjustments =		Approved by:	MaineDOT Progra	am/Project Manager	Date	
TOTAL AMOUNT	<u> DUE THIS INVOICE</u> =			(Work perform	med as specified)		

Sheet 1C of 5 Payment Type: * Lump Sum		e of Maine Department nsportation Building Augusta, Maine **In Accou	16 State House Station 9 04333-0016	n <= Firm Name <= Payment mailing address	P.V. #: CT #: CSN #: Vendor/Customer #: TEDOCS #: Doc. Date: Doc. Type: OUC: Author:	Use Only
		Vendor/Customer # =>				
Consultant Invoice Number: Invoice Period:					Invoice Date:	
State Contract Number: Project Contract Award Date: Project Contract Completion Date:			COMMENT:	Consultant Project #: MaineDOT PIN: Project Name:		
I hereby certify that the signature below is true and a to have the same force as a manual signature, (b) is under the sole control of myself. Initials:						
Signed: Please Type: Name,	Title	Amount Invoiced This Period	Amount Previously Invoiced	Cumulative Amount Invoiced To Date	Contract Amounts	Contract Balance
	Lump Sum To Date =					
Direct Expenses	(see Sheet 5 of 5 for detail) =					
Subconsultant Summary:	DBE/WBE => yes/no					
	Total Subconsultants =					
	Total Invoice Amounts =					
IOTAL AMOUNT	<u>DUE THIS INVOICE</u> =					
			Approved by:	MaineDOT Progra	am/Project Manager ned as specified)	Date

Sheet 1CF of 5		State of Maine Depar	rtment of Transportati			Use Only
Payment Type: * Lump Sum	Tra	nsportation Building Augusta, Maind **In Accou		P.V. #: CT #: CSN #: Vendor/Customer #:		
FINAL INVOICE				<= Firm Name	TEDOCS #: Doc. Date:	
		Street (PO Box) Town, State ZIP			Doc. Type: OUC:	
		Vendor/Customer # =>		•	Author:	
Consultant Invoice Number: Invoice Period:					Invoice Date:	
State Contract Number: Project Contract Award Date: Project Contract Completion Date:			COMMENT:	Consultant Project #: MaineDOT PIN: Project Name:		
I hereby certify that the signature below is true and intended to have the same force as a manual signal and (d) is under the sole control of myself. Initials	accurate. I further certify, if elecature, (b) is unique to myself, (c)			·		
Signed: Please Type: Name,	Title	Amount Invoiced This Period	Amount Previously Invoiced	Total Contract Effort	Contract Amounts	Contract Balance
L	ump Sum Final Invoice =					
	Straight Direct Labor = Straight Time Overhead = Overtime Direct Labor = Overtime Overhead = Direct Labor + Overhead = Profit = Sub-Total: Lump Sum = S (see Sheet 5 of 5 for detail) = DBE/WBE => yes/no					
Sub	-Total Invoice Amounts =					
Final Invoice	Total Invoice Amounts = ce Credits/Adjustments =					
Detail: 1) 2) 3)			Approved by:		am/Project Manager	Date
	DUE THIS INVOICE =		1	_	ned as specified)	

Maine Department of Transportation Sheet 2 of 5 Consultant Standard Invoice - Contract Data Entry Form Contract Information Final Invoice ? YES/NO => Current Invoice Information State Contract # Invoice Date => MaineDOT Contract Sequence # (CSN) Consultant Invoice # Consultant Project #: Consultant Project # Invoice Start Date (mm/dd/yy) MaineDOT PIN: Cost Plus Fixed Fee (Yes/No) **Burdened Hourly Rate or Cost per Unit (Yes/No)** Invoice End Date (mm/dd/yy) Project Title/Location: Lump Sum (Yes/No) % Complete To Date (FF or Lump Sum) Lump Sum for Labor+OH+Profit ONLY (Yes/No) **Award Date** mm/dd/yy Company Information **Completion Date** mm/dd/yy Firm Name Name Street (PO Box) **Address** Town, State ZIP VC0000000000 or VS0000000000 Vendor/Customer # Firm Is DBE/WBE

	Straight Direct Labor Amount	Straight Overhead Rate	Straight Overhead Amount	Overtime Direct Labor Amount	Overtime Overhead Rate	Overtime Overhead Amount	Profit Rate	Profit Amount	Fixed Fee N/A	Lump Sum N/A	Mileage Rate \$/mile	Direct Expense Amount	Sub Consultant Amount	TOTALS	Overhead Adjust Offset
Contract Values:															
Original Contract	0.00	0.0000%	0.00	0.00	0.0000%	0.00	0.0000%	0.00	0.00	0.00	0.00	0.00	0.00		
Mod #1															0.00
Mod #2															
Mod #3															
Mod #4															
Mod #5															
Mod #6															
Mod #7															
Mod #8															
Mod #9															
Mod #10															
Mod #11															
Mod #12															
Mod #13															
Mod #14															
Mod #15															
Mod #16															
Mod #17															
Mod #18															
Mod #19															
Mod #20															4
Mod #21															4
Mod #22															4
Mod #23															
Mod #24															
Mod #25															
Total Contract Value															
Previously Invoiced Total															
Current Invoice Total															
Contract Balance															

Invoice Date:

Maine Department of Transportation - Standard Invoice

DIRECT LABOR DETAIL

Consultant Name:
Vendor/Customer #:
Consultant Invoice Number:
Invoice Period:
State Contract Number:
Contract Award Date:
Contract Completion Date:

Consultant Project #:

MaineDOT PIN:

Project Title/Location:

Summary of Direct Labor:

Individual <u>NAME</u> <u>TITLE</u>	MaineDOT <u>PIN</u>	Stra	ight Direc	Over	time Direc	TOTAL Labor <u>Amount</u>
ame 1 Title 1 ame 2 Title 2 ame 3 Title 3 ame 4 Title 4	000000.00			0.000		
Total Direct Labor =						

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3 11	IEEL	40	OI.	J

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- III	voice	• Date

Maine Department of Transportation - Standard Invoice

SUB CONSULTANT DETAIL

	Consultant Project #:	
	MaineDOT PIN:	
Consultant Name:	Project Title/Location:	
Vendor/Customer #:		
Consultant Invoice #:		
Invoice Period:		
Contract Number:		
Contract Award Date:		
Contract Complete Date:		

Summary of DBE/WBE Participation:

	Amounts This Invoice								
DBE/WBE - yes/no =>								Invoice	Invoice
Subconsultants #1 - #7 MaineDOT PIN	Name Sub #1	Name Sub #2	Name Sub #3	Name Sub #4	Name Sub #5	Name Sub #6	Name Sub #7	Sub Total DBE/WBE Subs Only #1-7	Sub Total All Subs #1-7
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #1 - #7									
Previously Invoiced									
Total Subconsultant									
Contract Amount									
Subcontract Balance									

Total Contract Amount = Invoice Totals Subconsultants #1- #14

	<u>Value</u>	<u>Percentage</u>	
DBE Subconsultant Contract Amount =		#DIV/0!	of Contract
DBE Subconsultant Program Commitment =			of Program
Accrued Contract Billings to Date =		#DIV/0!	of Contract
Accrued DBE Billings to Date =		#DIV/0!	of DBE Amount

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- III	voice	• Date

Maine Department of Transportation - Standard Invoice

SUB CONSULTANT DETAIL continued

Consultant Project #: MaineDOT PIN: Project Title/Location:

Consultant Name:
Vendor/Customer #:
Consultant Invoice #:
Invoice Period:
State Contract Number:
Contract Award Date:
Contract Complete Date:

Summary of DBE/WBE Participation:

DBE/WBE - yes/no =>								Invoice	Invoice
Subconsultants #8 - #14 MaineDOT PIN	Name Sub #8	Name Sub #9	Name Sub #10	Name Sub #11	Name Sub #12	Name Sub #13	Name Sub #14	Sub Total DBE/WBE Subs Only #8-14	Sub Total All Subs #8-14
000000.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
INVOICE TOTALS #8 - #14									
Previously Invoiced									
Subcontract Amount									
Subcontract Balance									

Maine Department of Transportation - Standard Invoice

Invo	ica	Date	
IIIVU	ICC	Date	

PIN DETAIL

Overhead-Profit/Fee-Expenses

Consultant Name:		
Vendor/Customer #:	Consultant Project #:	
Consultant Invoice #:	MaineDOT PIN:	
Invoice Period:	Project Title/Location:	
State Contract Number:		
Contract Award Date:		
Contract Complete Date:		

			<= Labor + OH + Profit/Fee Di						Direct Expenses =>										
MaineDOT PIN	Town Name(s)	Fun/Act Coding		Straight Overhead Amount	Overtime Direct Labor Amount	Overtime Overhead Amount	Profit % or % Compl	Invoice Profit or Fee Amount	N/A		Mileaç Rate	ge Amount	Travel	Postage Delivery Printing	Phone FAX	Other	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period
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	OICE AMOUNTS => Sheet 5b if used)																		

Invoice Direct Labor Totals Above Match
Those on Sheet 3 of 5 Direct Labor

Invoice Sub Consultant Total Above Matches Total on Sheet 4 of 5 Sub Consultant

Consultant Name:
Vendor/Customer #:
Consultant Invoice #:
Invoice Period:
State Contract Number:
Contract Award Date:
Contract Complete Date:

Consultant Project #:

MaineDOT PIN:

Project Title/Location:

			<= Labor + OH + Profit/Fee						Direct Expenses =>										
										Mileage Postage								0.4	
MaineDOT PIN	Town Name(s)	Fun/Act Coding	Straight Direct Labor Amount	Straight Overhead Amount	Direct Labor Amount	Overtime Overhead Amount	or	Profit or Fee Amount	N/A			Amount	Travel	Postage Delivery Printing	Phone FAX	Other	Direct Expense Amount	Sub Consultant Amount	PIN Total This Period
000000.00																			

Fee/Profit Rate	Mileage Rate	Yes/No
0.0000%	\$0.00	
0.0000%	\$0.00	Yes
0.0000%	\$0.00	No
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
0.0000%	\$0.00	
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0.0000%	\$0.00	
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